David J Majernik 932 Rockland Drive Pittsburgh, PA 15239

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March 18, 2016

Federal Election Commission 999 E Street, N.W., Washington, DC 20463.

Please find enclosed an application to form a delegates committee.

Appreciate if you would time and date stamp the enclosed copy of the form and send it to me in the enclosed stamped envelope.

Thank you for your help.

Sincerely,

David J. Majernik

2016 - 03 - 23 - 05 - 00057251

FEC FORM 1

Office

Use

Only

STATEMENT OF ORGANIZATION

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Office Use Only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
[C,O,O,P,ER, AND	MAJERNIK	FOR DELEGA	TES
	<u> </u>		
ADDRESS (number and street)	19,3,2, ROCKL	AND DRIVE	
(Check if address is changed)		1,11,11,1,1,1,1,1,1	
	[P,1,T,T,5,3,V,R,6	3.H.	PA 1.5.239- ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRES	SS .		
(Check if address is changed)	D.MAJERNIK	(e, V, E, R, 1, Z, 0, N, ., N	ET, , , , , , , , , , , , , , , , , , ,
	Optional Second E-Mail Ad	ldress 0,0,P,E,R,C,V,E,R,7,Z	ON.NET
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		
(Check if address is changed)	1,,,,,,,,,,		
. , is slianged,			
	1		
2. DATE 03	8 2016		
3. FEC IDENTIFICATION NU	JMBER ▶ C		
4. IS THIS STATEMENT V	NEW (N) OR	AMENDED (A)	
I certify that I have examined th	is Statement and to the bes	t of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	David J	: Majernik	
Signature of Treasurer	David J. Mayer	nik)	Date 03 18 2016
NOTE: Submission of false, errone		may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

FEC FORM 1

(Revised 06/2012)

FEC PC	orm 1 (Hevised 02/2009)						
	YPE OF COMMITTEE						
Candidat	Candidate Committee:						
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)						
(p)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name of Candidate							
Candidate Party Affiliat	1 Office State tion Sought: House Senate President District						
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Co							
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Part						
Political A	Action Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is						
	Corporation Corporation w/o Capital Stock Labor Organization						
	Membership Organization Trade Association Cooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.						
(f) V	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or par committee. (i.e., nonconnected committee)						
	In addition, this committee is a Lobbyist/Registrant PAC.						
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
Joint Fun	draising Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.						
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
Cor	mmittees Participating in Joint Fundraiser						
1.	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
4,							

i						
	FEC Form 1 (Revised		Page 3			
W	/rite or Type Committee Name					
	Cooper and 11	layernik for Delegates				
6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor			
			1			
L.	<u> </u>		1 1 1 1 1 1 1			
L						
	Mailing Address					
			1 1 1 1 1			
		CITY STATE ZI	IP CODE			
	Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor			
	الييا					
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in posse	ession of committee			
	T. I.	1				
	Full Name VIII	L. COOPER				
	Mailing Address	[8,0,1,7, B,R,E,N, D,1,N,A, C,0,V,R,T,				
			1-1-1-1-1-			
		MURRYSV/LLE PR 15.6.6	<u> </u>			
	Title or Position	CITY STATE ZI	IP CODE			
		.70117	2201/02			
	CHALR	Telephone number 7.2.4 - [7.3	831-1214193			
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
	of Treasurer DAV	1.D. MAJERNIK,				
	Mailing Address	19.3.2 ROCKILAND DRIVE	11111			
						
		P. I. T.T. S. B.U.R. G. H. P. A. 15.2.3	191-1			
			P CODE			
	Title or Position		7,5]-[9,5,0,1			
	TREASURER	Telephone number $[4/32]-[49]$	10 - 7 5 0 /			

CITY

Page 4

ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

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Ideral Election Commission 999 E Street, N.W. Washington, 1906. 2046

AVID J. MAJERNIK 32 Rockland Dr. sburgh, PA 15239

(3/2015)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER

DATE PREPARED